



May, 2017 Various dates

Basic scaffolding course

Licence to erect, alter and dismantle scaffolding basic CPCCLSF2001 A

(Registered Training Organisation Nara Training & Assessing 4518 will be the RTO issuing this qualification)

This nationally accredited course is based upon the National Standard for Licensing Persons Performing High Risk Work.

Participants will undergo training in:

- Current legislation and requirements
- > Hazard identifications & risk management
- > Preparing, erecting, maintaining and dismantling prefabricated scaffolding
- > Cantilevered materials hoist, ropes and gin wheels
- > Safety nets and static lines and bracket scaffolds

On day of course:

- Please bring photo ID
- Wear appropriate protective clothing & footwear, no thongs/singlets.
- You must be a minimum of 18 years of age.



Upon successful completion of the course, you will be issued with a Statement of Attainment for CPCCLSF2001A Licence to erect, alter and dismantle scaffolding basic.

Notice of Assessment (interim licence)

DATES: 8-11 OR 22-26 May, 2017

TIME: 8.00am - 4.00pm

TRAINER: Nara Training & Assessing

VENUE: Nara Training & Assessing, 26 Clifford Street, Bunbury

COST:

 MBA Member eligible for CTF subsidy
 \$810.00 - \$720.00^
 \$90.00*

 Non-member eligible for CTF subsidy
 \$900.00 - \$720.00^
 \$180.00*

 MBA Member
 \$810.00
 \$810.00*

 Non-member
 \$900.00
 \$900.00*

PLEASE NOTE: An additional fee of \$90.00 per person is also required for your WorkSafe Licence

If you require further assistance, please contact the South West office on **9726 0939** or email southwest@mbawa.com



The Construction Training Fund provides funding support for training of eligible workers in the construction industry. We acknowledge the support of the Construction Training Fund in reducing costs of training for eligible workers.







CPCCLSF2001A-BASIC SCAFFOLDING May, 2017 (5 day course) 8.00am - 4.00pm

Please Note: This course is subsidised by the Construction Training Fund (CTF) for eligible participants. Master Builders requires

| participants details to be provided as indicated below otherwise the full fee may apply. | | | | | | | | | |
|--|--|-------------------|---------|--------------------------------------|-------------|------------|---------------------|-------------------|--|
| Course date: | П 8 | B-11 May | | | ☐ 22-26 May | | | | |
| PARTICIPANT DETAILS: | | | | | | | | | |
| Surname: | | | | | First name: | | | | |
| Date of birth: | ate of birth: Unique Student Identifier (USI): | | | | | | | | |
| Mobile: | | | | | Email: | | | | |
| Home address: | | | | | | | | | |
| Suburb: | | | | | | | Postcode: | | |
| Job/Trade title: | | | | | | | | | |
| Job description (brief detail): | | | | | | | | | |
| EMPLOYER/COMPANY DETAILS: | | | | | | | | | |
| Master Builders member name: | | | | | | Member no: | | | |
| Employer/company name: | | | | | | | | | |
| Builders Registration number: (if applicable) | | | | | | | | | |
| Address: | | | | | | | | | |
| Suburb: | | | | | Postcode: | | | | |
| Contact name: | | | | Email: | Email: | | | | |
| Phone: | Fax: | | | | Mobile: | | | | |
| Please tick the industry sector in which you work | | | | Commercial □ Housing □ Engineering □ | | | | | |
| PAYMENT DETAILS | | | | | | | | | |
| Payment must be received prior to the course date to secure your place & receive your confirmation. EMAIL: southwest@mbawa.com FAX: 9726 0949 POST: Master Builders Association, P.O. Box 253, Bunbury WA 6231 | | | | | | | | | |
| Course Costs | | | Mast | ter Builde | r member | • | Non- | member | |
| Eligible for CTF subsidy | | | | \$ 90.00 per person | | | | per person | |
| Not eligible for CTF subsi | • | | | 310.00 per | • | | | per person | |
| Please note that course costs are subject to change. This course is GST free PLEASE NOTE: An additional fee of \$90.00 per person is also required for your WorkSafe Licence | | | | | | | | | |
| Method of Payment (| Cash ⊏ | Cheque | □ Credi | t Card □ | EFT 🗆 | Amou | unt: \$ | | |
| Credit Card Details: | | Bankcard | □ Ma | sterCard □ | ı Vis | sa □ | | | |
| Card number: | _ / _ | / | | _ / | | Expiry | Date: | / | |
| Cardholders Name: Signature: | | | | | | | | | |
| EFT Direct Credit Details: BSB: 306 051 Account: 038 925 1 Reference: Please quote invoice number | | | | | | | | | |
| Cancellation Notice | A refund | d will not be pro | | nows on the d | | se or can | cellations less the | an 5 working days | |

prior to the course date. You may, however, substitute another person up to 48 hours prior to the course.